X Customer Number or Bar Code Label			24972	or	Correspondence address below	
Name						
Address						
City		State		Zip Code		
Country	_	Telephone	212-318-3148	F	212-318-3400	
Name (Print/	Type) James R. Crav	vford	Registration No. (Att	torney/Agent)	39,155	

November 10, 2003

25355372.1

Signature

PTO/SB/17 (11-01)

Approved for use through 10/31/2002. OMB 0651-0032

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		Complete if Known						
FEE TRANSMITTAL		Application Number						
for FY 2003		Filing Date						
Patent fees are subject to annual revision.		First Named Inventor Boumann, et al.		ntor Boumann, et al.				
ratent lees are subject to annual levision.		Exam	iner N	lame				
Applicant claims small entity status. See 37 CFR 1.27		Group	) Art l	Jnit				
TOTAL AMOUNT OF PAYMENT (\$) 880.00	_				CERA-231.2-US-CONT.			
METHOD OF PAYMENT (check all that apply)		/ Alcorro.						
		FEE CALCULATION (continued)						
Check Credit Money Order None 3. ADDITIONAL FEES								
X Deposit Account								
Deposit Account 50-0624	Large Fee	e Entity Fee	Sma Fee	II Entity Fee				
Number 50-002-4	Code		Code	(\$)	Fee Description Fee Paid			
Deposit Account Fulbright & Jaworski L.L.P.	105	130	205	65	Surcharge – late filing fee or oath			
Name	127	50	227	25	Surcharge – late provisional filing fee or cover			
The Commissioner is hereby authorized to: (check all that apply)					sheet.			
X Charge fee(s) indicated below X Credit any overpayments	139	130	139	130	Non-English specification			
X Charge any additional fee(s) during the pendency of this application	147	2,520	147.	2,520	For filing a request for ex parte reexamination			
Charge fee(s) indicated below, except for the filing fee	112	920*	112	920*	Requesting publication of SIR prior to  Examiner action			
to the above-identified deposit account.	113	1,840*	113	1,840*	Requesting publicati of SIR after Examiner action			
FEE CALCULATION	115	110	215	55	Extension for reply within first month \$110.00			
1. BASIC FILING FEE	116	400	216	200	Extension for reply within second month			
Large Entity Small Entity	117	920	217	460	Extension for reply within third month			
Fee Fee Fee Fee Fee <u>Fee Description</u> <u>Fee Paid</u>	118	1,440	218	720	Extension for reply within fourth month			
101 740 201 370 Utility filing fee 770.00	128	1,960	228	980	Extension for reply within fifth month			
106 330 206 165 Design filing fee	119	320	219	160	Notice of Appeal			
107 510 207 255 Plant filing fee 108 740 208 370 Reissue filing fee	120 121	320 280	220	160 140	Filing a brief in support of an appeal  Request for oral hearing			
114 160 214 80 Provisional filing fee	138	1,510	138	1,510	Petition to institute a public use proceeding			
	140	110	240	55	Petition to revive unavoidable			
SUBTOTAL (1) (8)	141	1,280	241	640	Petition to revive – unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	142	1,280	242	640	Utility issue fee (or reissue)			
Extra Fee from Fee Paid Claims below Fee Paid	143	460	243	230	Design issue fee			
Total Claims20** = x =	144	620	244	310	Plant issue fee			
Independent -3** = X	122	130	122	130	Petitions to the Commissioner			
Multiple Dependent	123	50	123	50	Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee	126	180	126	180	Submission of Information Disclosure Stmt			
Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per property (times number of properties)			
103 18 203 9 Claims in excess of 20	146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))			
102   84   202   42   Independent claims in excess of 3   104   280   204   140   Multiple dependent claim, if not paid	149	740	249	370	For each additional invention to be			
109 84 209 42 ** Reissue independent claims	179	740	279	370	examined (37CFR 1.129(b)) Request for Continued Examination (RCE)			
over original patent	169	900	169	900	Request for expedited examination			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other	fee (spe	l		of a design application			
SUBTOTAL (2) 770.00			•	ilina Fee	Paid SUBTOTAL (3) (\$) 110.00			
SUBTOTAL (2) 770.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110.00								
SUBMITTED BY		•			Complete (if applicable)			
Name (Print/Type) James R. Crawford		ration No ey/Agent		9,155	Telephone (212) 318-3148			
Signature (am. A Cram	() IIIO	oyir igorii,			Date November 10, 2003			
Date November 10, 2003								
	Foc 7	ransmi	Hal					
I hereby certify that this correspondence is being deposited in an envelope addressed to: Box Patent Application, Comr	with th	e U.S.	Posta	Service	e as Express Mail, Airbill No. EL 829647115 US			
Dated: 11 16 03 Signature: Eshosfield (Eileen Sheffield)								